Fill in this info	rmation to identify your	case and this filing:		
Debtor 1	Michael Albert So	chneider		
	First Name	Middle Name	Last Name	
Debtor 2	Pamela Elaine So	chneider		
(Spouse, if filing)	First Name	Middle Name	Last Name	
United States B	ankruptcy Court for the:	MIDDLE DISTRICT OF P	ENNSYLVANIA	
Case number	1:20-bk-01383			

Check if this is an amended filing

## Official Form 106A/B

## Schedule A/B: Property

12/15

In each category, separately list and describe items. List an asset only once. If an asset fits in more than one category, list the asset in the category where you think it fits best. Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

o	you own or have a	iny legal or ed	uitable interest in a	ıny resid	ence, building, land, or similar property?		
J	No. Go to Part 2.						
	Yes. Where is the p	property?					
				What	is the property? Check all that apply		
	79 Lakeview C				Single-family home	Do not deduct secured c	
	Street address, if availa	able, or other des	scription		Duplex or multi-unit building	the amount of any secure Creditors Who Have Cla	
					Condominium or cooperative		
					Manufactured or mobile home	O	O
	Hanover	PA	17331-0000		Land	Current value of the entire property?	Current value of the portion you own?
	City	State	ZIP Code		Investment property	\$264,600.00	\$264,600.
					Timeshare	Describe the nature of	vour ownership interes
					Other	(such as fee simple, ter a life estate), if known.	nancy by the entireties
				Who	has an interest in the property? Check one  Debtor 1 only	a me estate), ii known.	
				_	Debtor 2 only		
	County				Debtor 1 and Debtor 2 only		
					At least one of the debtors and another	Check if this is cor (see instructions)	nmunity property
					r information you wish to add about this iter erty identification number:	m, such as local	
				unfi	idence: Single Family Home: 3 BR nished basement, approx. 1 acre. ie is from CMA minus 10% hypoth		garage,

Add the dollar value of the portion you own for all of your entries from Part 1, including any entries for pages you have attached for Part 1. Write that number here........

\$264.600.00

Part 2: Describe Your Vehicles

Do you own, lease, or have legal or equitable interest in any vehicles, whether they are registered or not? Include any vehicles you own that someone else drives. If you lease a vehicle, also report it on Schedule G: Executory Contracts and Unexpired Leases.

Official Form 106A/B Schedule A/B: Property page 1

Debto Debto		lichael Albert Pamela Elaine			Case number (if known)	1:20-bk-01383
3. <b>Ca</b> ı	rs, vans	, trucks, tractor	rs, sport utility ve	hicles, motorcycles		
	No					
<b>■</b> \						
_	103					
3.1	Make:	Ford Exped	dition	Who has an interest in the property? Check one	5	1.1.1. C. D.
			ddie Bauer		the amount of any	sured claims or exemptions. Put secured claims on Schedule D:
	Model:	4WD		Debtor 1 only	Creditors Who Ha	ve Claims Secured by Property.
	Year:	2004		Debtor 2 only	Current value of	the Current value of the
	Approxi	mate mileage:	135,000	■ Debtor 1 and Debtor 2 only	entire property?	portion you own?
1		formation:	-	At least one of the debtors and another		
		e: We current lue Book val		Charle if this is community property	\$2,925	5.00 \$2,925.00
		in 2019 over S		LI Check if this is community property (see instructions)		<u> </u>
	000.0		70,000.00			
3.2	Make:	BMW X5		Who has an interest in the preparty? Check one	Do not deduct sec	cured claims or exemptions. Put
3.2	Model:	Utility 4D 3	OL AWD	Who has an interest in the property? Check one ☐ Debtor 1 only		secured claims on Schedule D: ve Claims Secured by Property.
	Year:	2010	UI ATTE	Debtor 2 only	Creditors with Ha	
		mate mileage:	120,800	■ Debtor 1 and Debtor 2 only	Current value of entire property?	the Current value of the portion you own?
		formation:		☐ At least one of the debtors and another	entire property:	portion you own:
	Vehicl			At least one of the debtors and another		
				☐ Check if this is community property	\$9,875	5.00 \$9,875.00
				(see instructions)		
.pa Part 3	es ld the deges you	have attached	for Part 2. Write	n for all of your entries from Part 2, including that number hereems ems terest in any of the following items?		\$12,800.00  Current value of the
						portion you own? Do not deduct secured claims or exemptions.
Ex	amples: No	escribe	es, furniture, linens	, china, kitchenware		
		(		ouch (\$10); Bookcase (\$200); Desk (\$10 es (\$25); Two Lamps (\$20); Two Corner		\$330.00
			Dining Room: F	ive Chairs (\$50); Silverware (\$50)		\$100.00
				ee Beds (\$170); Two Dressers (\$50); Ch ; Mirror (\$10); Three Lamps (\$60)	est of	\$490.00

Official Form 106A/B

Schedule A/B: Property

page 2

Best Case Bankruptcy

Debtor 1 Debtor 2	Michael Albert Schneider Pamela Elaine Schneider	Case number (if known)	1:20-bk-01383
	Kitchen: Table (\$50); Four chiars (\$80); Microwave Refrigerator (\$100); Dishwasher (\$200); Washing M Dryer (\$200); Stove (\$50); Dishes (\$50); Cookare (\$50);	lachine (\$200);	\$990.00
	Other Rooms: Vacuum Cleaner (\$20); Iron (\$5); Too Power Tools (\$200)	ols (\$300);	\$525.00
□ No	nics les: Televisions and radios; audio, video, stereo, and digital equipment; computer including cell phones, cameras, media players, games  Describe	rs, printers, scanners; music co	ollections; electronic devices
	All Electronics: Two Television: \$250; Computer (\$	100)	\$350.00
Example ■ No	bles of value les: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other collections, memorabilia, collectibles  Describe	other art objects; stamp, coin,	or baseball card collections;
Example No	nent for sports and hobbies les: Sports, photographic, exercise, and other hobby equipment; bicycles, pool ta musical instruments  Describe	ibles, golf clubs, skis; canoes a	and kayaks; carpentry tools;
■ No	ns  ples: Pistols, rifles, shotguns, ammunition, and related equipment  Describe		
□ No	bis boles: Everyday clothes, furs, leather coats, designer wear, shoes, accessories  Describe		
	All Debtor 1 and 2 Apparel		\$400.00
□ No	y poles: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirld Describe	oom jewelry, watches, gems, g	old, silver
	All Debtor Jewelry for 1 and 2		\$280.00
Exam <sub>l</sub> □ No -	arm animals ples: Dogs, cats, birds, horses  Describe		
. 00.	Four Pets		\$100.00
14. <b>Any ot</b>	her personal and household items you did not already list, including any ho	ealth aids you did not list	

No

☐ Yes. Give specific information.....

Official Form 106A/B

Schedule A/B: Property

page 3

Debtor 1 Debtor 2	Pamela Elaine Schr		Case number (if known)	1:20-bk-01383
			art 3, including any entries for pages you have attached	\$3,565.00
	escribe Your Financial Asse wn or have any legal or e		any of the following?	Current value of the portion you own? Do not deduct secured claims or exemptions.
☐ No	ples: Money you have in y	-	me, in a safe deposit box, and on hand when you file your petiti	on
			Cash	\$22.00
Exam <sub>i</sub> □ No		ve multiple accounts	ounts; certificates of deposit; shares in credit unions, brokerage has with the same institution, list each.  Institution name:  Members 1st Federal Credit Union	houses, and other similar
			M 9 T Dank	
	17.2.	Checking	M & T Bank	\$629.03
	17.3.	Checking	Acorns	\$50.00
	17.4.	Savings	First Financial Federal Credit Union of Maryland	\$5.00
	17.5.	Savings	M & T Bank	\$58.90
	17.6.	Savings	Suncoast Federal Credit Union	\$10.00
	17.7.	Savings	Acorns	\$100.00
	s, mutual funds, or public ples: Bond funds, investm		okerage firms, money market accounts	
		Institution or issuer	name:	
joint v	ublicly traded stock and venture	interests in incorpo	orated and unincorporated businesses, including an interes	it in an LLC, partnership, and
■ No □ Yes.	Give specific information Na	about them me of entity:	 % of ownership:	
Negot	tiable instruments include	personal checks, cas	tiable and non-negotiable instruments hiers' checks, promissory notes, and money orders.	
Non-n Official For	· ·	mose you cannot tra	nsfer to someone by signing or delivering them.  Schedule A/B: Property	page 4

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Best Case Bankruptcy

	ebtor 1 ebtor 2	Michael Albert Schneider Pamela Elaine Schneider	Case number (if known)	1:20-bk-01383
	■ No □ Yes.	Give specific information about them Issuer name:		
21.		nent or pension accounts oles: Interests in IRA, ERISA, Keogh, 401(k), 403(b),	thrift savings accounts, or other pension or profit-sharing	plans
	☐ Yes.	List each account separately.  Type of account:	Institution name:	
22.	Your s Examp	y deposits and prepayments hare of all unused deposits you have made so that y bles: Agreements with landlords, prepaid rent, public	rou may continue service or use from a company utilities (electric, gas, water), telecommunications compar	nies, or others
	■ No □ Yes.		Institution name or individual:	
23.	Annuiti	es (A contract for a periodic payment of money to yo	ou, either for life or for a number of years)	
	☐ Yes	Issuer name and description.		
24.		s in an education IRA, in an account in a qualifie C. §§ 530(b)(1), 529A(b), and 529(b)(1).	d ABLE program, or under a qualified state tuition pro	ogram.
	☐ Yes	Institution name and description. Sep	arately file the records of any interests.11 U.S.C. § 521(c):	
25.	■ No		han anything listed in line 1), and rights or powers exe	ercisable for your benefit
00		Give specific information about them	or intellectual manager	
26.		<ul> <li>s, copyrights, trademarks, trade secrets, and oth eles: Internet domain names, websites, proceeds from the secrets of the secret of the secret</li></ul>		
	☐ Yes.	Give specific information about them		
27.		es, franchises, and other general intangibles oles: Building permits, exclusive licenses, cooperative	e association holdings, liquor licenses, professional licens	es
	☐ Yes.	Give specific information about them		
M	oney or	property owed to you?		Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	_	unds owed to you		
	■ No □ Yes.	Give specific information about them, including whet	her you already filed the returns and the tax years	
29.	Family Examp		c, child support, maintenance, divorce settlement, property	settlement
	_	Give specific information		
30.	Examp	amounts someone owes you  bles: Unpaid wages, disability insurance payments, disability insur	lisability benefits, sick pay, vacation pay, workers' comperse	nsation, Social Security
	■ No □ Yes.	Give specific information		

Official Form 106A/B Schedule A/B: Property page 5

			3/09/21 12:01P
Debtor 1 Debtor 2	Michael Albert Schneider Pamela Elaine Schneider	Case number (if known)	1:20-bk-01383
	sts in insurance policies		
	ples: Health, disability, or life insurance; health savings account (HSA)	); credit, homeowner's, or renter's insurar	nce
■ No			
⊔ Yes.	Name the insurance company of each policy and list its value.  Company name:	Beneficiary:	Surrender or refund value:
If you some	nterest in property that is due you from someone who has died are the beneficiary of a living trust, expect proceeds from a life insuratione has died.	nce policy, or are currently entitled to rece	eive property because
■ No			
☐ Yes.	Give specific information		
Exam ■ No	s against third parties, whether or not you have filed a lawsuit or ples: Accidents, employment disputes, insurance claims, or rights to s		
⊔ Yes.	Describe each claim		
■ No	contingent and unliquidated claims of every nature, including co	unterclaims of the debtor and rights to	set off claims
⊔ Yes.	Describe each claim		
35. <b>Any fi</b> i	nancial assets you did not already list		
■ No			
☐ Yes.	Give specific information		
	the dollar value of all of your entries from Part 4, including any er art 4. Write that number here		\$1,441.93
Part 5: De	escribe Any Business-Related Property You Own or Have an Interest In. Lis	st any real estate in Part 1.	
-	own or have any legal or equitable interest in any business-related proper	ty?	
No. G	o to Part 6.		
☐ Yes. (	Go to line 38.		
Part 6: De	escribe Any Farm- and Commercial Fishing-Related Property You Own or h you own or have an interest in farmland, list it in Part 1.	Have an Interest In.	
46. <b>Do yo</b> ı	u own or have any legal or equitable interest in any farm- or com	mercial fishing-related property?	
■ No.	. Go to Part 7.		
☐ Yes	s. Go to line 47.		
Part 7:	Describe All Property You Own or Have an Interest in That You Did Not	List Ahove	
rait r.	Describe All Freperty Fou own of fluve all interest in flux fou but not	LIST ABOVE	
_Exam	u have other property of any kind you did not already list?  ples: Season tickets, country club membership		
■ No □ Yes.	Give specific information		
54 <b>A</b> dd	the dollar value of all of your entries from Part 7. Write that numb	er here	\$0.00
J4. Aud	ane donar value of an or your entries from Fart 7. Write that humb	01 11016	<u> </u>

Official Form 106A/B Schedule A/B: Property page 6

\$282,406.93

Michael Albert Schneider Debtor 1 Case number (if known) 1:20-bk-01383 Debtor 2 Pamela Elaine Schneider Part 8: List the Totals of Each Part of this Form 55. Part 1: Total real estate, line 2 ..... \$264,600.00 Part 2: Total vehicles, line 5 \$12,800.00 57. Part 3: Total personal and household items, line 15 \$3,565.00 Part 4: Total financial assets, line 36 \$1,441.93 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... \$17,806.93 Copy personal property total \$17,806.93

63. Total of all property on Schedule A/B. Add line 55 + line 62

Debtor 1	Michael Albert So	hneider		
	First Name	Middle Name	Last Name	
Debtor 2	Pamela Elaine Sc	hneider		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	MIDDLE DISTRICT OF	PENNSYLVANIA	
Case number	1:20-bk-01383			

Check if this is an amended filing

## Official Form 106C

## Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Pa	rt 1: Identify the Property You Claim as E	xempt			
1.	Which set of exemptions are you claiming	? Check one only, eve	n if yo	ur spouse is filing with you.	
	☐ You are claiming state and federal nonban	kruptcy exemptions.	11 U.S	S.C. § 522(b)(3)	
	■ You are claiming federal exemptions. 11 U	J.S.C. § 522(b)(2)			
2.	For any property you list on Schedule A/B	that you claim as exe	empt,	fill in the information below.	
	Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
	79 Lakeview Circle Hanover, PA 17331	\$264,600.00		\$470.47	11 U.S.C. § 522(d)(1)
	Residence: Single Family Home: 3 BR, 2.5 bath, side load garage, unfinished basement, approx. 1 acre. Value is from CMA minus 10% hypothetical cost of sale. Line from Schedule A/B: 1.1			100% of fair market value, up to any applicable statutory limit	
	Living Room: Couch (\$10); Bookcase	\$330.00		\$330.00	11 U.S.C. § 522(d)(3)
	(\$200); Desk (\$10); Chair (\$15); Two Tables (\$25); Two Lamps (\$20); Two Corner Cabinets (\$50) Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
	Dining Room: Five Chairs (\$50); Silverware (\$50)	\$100.00		\$100.00	11 U.S.C. § 522(d)(3)
	Line from Schedule A/B: <b>6.2</b>			100% of fair market value, up to any applicable statutory limit	
	Bedrooms: Three Beds (\$170); Two Dressers (\$50); Chest of Drawers	\$490.00		\$490.00	11 U.S.C. § 522(d)(3)
	(\$200); Mirror (\$10); Three Lamps (\$60) Line from Schedule A/B: 6.3			100% of fair market value, up to any applicable statutory limit	

Official Form 106C

Schedule C: The Property You Claim as Exempt

page 1 of 3

Desc

Michael Albert Schneider Debtor 1 1:20-bk-01383 Debtor 2 Pamela Elaine Schneider Case number (if known) Current value of the Amount of the exemption you claim Specific laws that allow exemption Brief description of the property and line on Schedule A/B that lists this property portion you own Copy the value from Check only one box for each exemption. Schedule A/B Kitchen: Table (\$50); Four chiars 11 U.S.C. § 522(d)(3) \$990.00 \$990.00 (\$80); Microwave (\$10); Refrigerator (\$100); Dishwasher (\$200); Washing 100% of fair market value, up to Machine (\$200); Dryer (\$200); Stove any applicable statutory limit (\$50); Dishes (\$50); Cookare (\$50) Line from Schedule A/B: 6.4 Other Rooms: Vacuum Cleaner (\$20); 11 U.S.C. § 522(d)(3) \$525.00 \$525.00 Iron (\$5); Tools (\$300); Power Tools (\$200) 100% of fair market value, up to Line from Schedule A/B: 6.5 any applicable statutory limit All Electronics: Two Television: 11 U.S.C. § 522(d)(3) \$350.00 \$350.00 \$250; Computer (\$100) Line from Schedule A/B: 7.1 100% of fair market value, up to any applicable statutory limit All Debtor 1 and 2 Apparel 11 U.S.C. § 522(d)(3) \$400.00 \$400.00 Line from Schedule A/B: 11.1 П 100% of fair market value, up to any applicable statutory limit All Debtor Jewelry for 1 and 2 11 U.S.C. § 522(d)(4) \$280.00 \$280.00 Line from Schedule A/B: 12.1 100% of fair market value, up to any applicable statutory limit **Four Pets** 11 U.S.C. § 522(d)(3) \$100.00 \$100.00 Line from Schedule A/B: 13.1 100% of fair market value, up to any applicable statutory limit Cash 11 U.S.C. § 522(d)(5) \$22.00 \$22.00 Line from Schedule A/B: 16.1 100% of fair market value, up to any applicable statutory limit Checking: Members 1st Federal 11 U.S.C. § 522(d)(5) \$567.00 \$567.00 **Credit Union** Line from Schedule A/B: 17.1 100% of fair market value, up to any applicable statutory limit Checking: M & T Bank 11 U.S.C. § 522(d)(5) \$629.03 \$629.03 Line from Schedule A/B: 17.2 100% of fair market value, up to any applicable statutory limit **Checking: Acorns** 11 U.S.C. § 522(d)(5) \$50.00 \$50.00 Line from Schedule A/B: 17.3 100% of fair market value, up to any applicable statutory limit 11 U.S.C. § 522(d)(5) Savings: First Financial Federal \$5.00 \$5.00 **Credit Union of Maryland** Line from Schedule A/B: 17.4 100% of fair market value, up to any applicable statutory limit

Official Form 106C

	btor 1 btor 2	Michael Albert Schneider Pamela Elaine Schneider			Case number (if known)	1:20-bk-01383
		lescription of the property and line on lule A/B that lists this property	Current value of the portion you own	Amo	ount of the exemption you claim	Specific laws that allow exemption
			Copy the value from Schedule A/B	Che	ck only one box for each exemption.	
		ngs: M & T Bank rom Schedule A/B: 17.5	\$58.90		\$58.90	11 U.S.C. § 522(d)(5)
	Linon	om osnodate /v2. Trio			100% of fair market value, up to any applicable statutory limit	
	Savir	ngs: Suncoast Federal Credit	\$10.00		\$10.00	11 U.S.C. § 522(d)(5)
		rom Schedule A/B: <b>17.6</b>			100% of fair market value, up to any applicable statutory limit	
		ngs: Acorns	\$100.00		\$100.00	11 U.S.C. § 522(d)(5)
	LINE	om schedule AVB. 11.1			100% of fair market value, up to any applicable statutory limit	
3.	(Subje	ou claiming a homestead exemption ect to adjustment on 4/01/22 and every			led on or after the date of adjustmer	nt.)
		No				
		es. Did you acquire the property cove	red by the exemption w	ithin 1	,215 days before you filed this case	?
		□ No				
		Yes				

Fill in this information to	o identify your case:
Debtor 1	Michael Albert Schneider
Debtor 2 (Spouse, if filing)	Pamela Elaine Schneider
United States Bankrupt	tcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA
Case number 1:2	0-bk-01383

#### Check if this is:

- An amended filing
- ☐ A supplement showing postpetition chapter 13 income as of the following date:

MM / DD/ YYYY

## Official Form 106I

### Schedule I: Your Income

12/15

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

#### **Describe Employment** Fill in your employment Debtor 1 Debtor 2 or non-filing spouse information. □ Employed If you have more than one job, ■ Employed **Employment status\*** attach a separate page with ■ Not employed Not employed information about additional employers. Occupation **Director of Rehabilitation PRN Physical Therapist Assistant** Include part-time, seasonal, or Employer's name **Priority Health Care Group** self-employed work. Occupation may include student **Employer's address** 99 W. Hawthorne Ave. suite or homemaker, if it applies. 508 Valley Stream, NY 11580 How long employed there? 15 Years, 5 Months \*See Attachment for Additional Employment Information

Part 2: Give Details About Monthly Income

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

For Debtor 1 For Debtor 2 or non-filing spouse

2. \$ 7,068.75 \$ 0.00

3. +\$ 0.00 +\$ 0.00

4. \$ 7,068.75 \$ 0.00

Page 11 of 15

Main Document

Michael Albert Schneider Debtor 1 1:20-bk-01383 Debtor 2 Pamela Elaine Schneider Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 7.068.75 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 1,045.92 0.00 Mandatory contributions for retirement plans 5b. 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. 0.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 1,147.03 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ 0.00 \$ 0.00 6. Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 2,192.95 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7 7. 4,875.80 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total 0.00 monthly net income. 8a 0.00 8h. Interest and dividends 8h. 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 2,288.00 **Social Security** 8e. 8e. 0.00 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 \$ 0.00 Specify: 8g. 8g. Pension or retirement income \$ 0.00 0.00 Other monthly income. Specify: 8h.+ 8h. \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9. 2,288.00 0.00 10. \$ \$ 10. Calculate monthly income. Add line 7 + line 9. 4,875.80 2,288.00 \$ 7,163.80 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11.

12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 7,163.80 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain: debtor husband has enrolled company's retirment program.

Desc

Debtor 1 Michael Albert Schneider
Debtor 2 Pamela Elaine Schneider

Case number (if known) 1:20

1:20-bk-01383

# Official Form B 6I Attachment for Additional Employment Information

B 14		
Debtor		
Occupation	PRN Physical Therapist Assistant	
Name of Employer	Priority Healthcare Group	
How long employed	25 Years, 0 Months	
Address of Employer	99 W. Hawthorne Ave. suite 508	
, ,	Valley Stream, NY 11580	
D-Li-		
Debtor		
Occupation	PRN Physical Therapist Assistant	
Name of Employer	Genesis Healthcare	
How long employed	8 Years, 0 Months	
Address of Employer	101 East State Street	
	Kennett Square, PA 19348	
Dobtos		
Debtor		
Occupation	PRN Physical Therapist Assistant	
Name of Employer	Metro Health & Rehab, LLC	
How long employed	2 Years, 0 Months	
Address of Employer	5257 Buckeystown Pike #257	
	Frederick, MD 21704	

Debto							
	Michael Albert Schneider		Check if this is:				
			_	n amended filing			
ebto Spou	or 2 use, if filing)  Pamela Elaine Schneider		_	supplement snow 3 expenses as of t	ring postpetition chap the following date:		
nited States Bankruptcy Court for the: MIDDLE DISTRICT OF PENNSYLVANIA			MM / DD / YYYY				
ase ı f kno	number own) 1:20-bk-01383						
Off	ficial Form 106J						
Scl	hedule J: Your Expenses						
umk art 1	Is this a joint case?  ☐ No. Go to line 2.  ■ Yes. Does Debtor 2 live in a separate household?  ■ No				oui name and case		
	☐ Yes. Debtor 2 must file Official Form 106J-2, Expens	ses for Separate Household of	Debto	r 2.			
	Do you have dependents? ☐ No						
	Do not list Debtor 1 and Debtor 2.    Yes. Fill out this information for each dependent		to	Dependent's age	Does dependent live with you?		
	Do not state the				□ No		
	dependents names.	Daughter		14	■ Yes		
		Daughter		19	□ No ■ Yes		
		Son		20	□ No ■ Yes		
•	Do your expenses include expenses of people other than yourself and your dependents? ■ No Yes				□ No □ Yes		
•	2: Estimate Your Ongoing Monthly Expenses nate your expenses as of your bankruptcy filing date unles	ss you are using this form as	a sup	plement in a Cha	pter 13 case to repc		
art 2 stim	enses as of a date after the bankruptcy is filed. If this is a su	upplemental <i>Schedule J</i> , che	ck the	box at the top of	the form and fill in		
stin xpe	icable date.						
stim xper pplic nclud	icable date. Ide expenses paid for with non-cash government assistand ralue of such assistance and have included it on <i>Schedule</i> cial Form 106I.)	•		Your expe	enses		
stim kper oplic iclude ve Offic	de expenses paid for with non-cash government assistand ralue of such assistance and have included it on Schedule	I: Your Income	4. \$	Your expe	enses 0.00		
clue e va	ide expenses paid for with non-cash government assistance along the control of th	I: Your Income	4. \$	Your expe			
stim (per oplic clude (e va ) ) ) ) (iii)	ide expenses paid for with non-cash government assistance and have included it on Schedule cial Form 106I.)  The rental or home ownership expenses for your residence payments and any rent for the ground or lot.	I: Your Income  e. Include first mortgage	4. \$	Your expe			
stim xper pplical nclude ne va Offical	tide expenses paid for with non-cash government assistance ralue of such assistance and have included it on Schedule cial Form 106I.)  The rental or home ownership expenses for your residence payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes  4b. Property, homeowner's, or renter's insurance	I: Your Income  e. Include first mortgage  4	a. \$ b. \$	Your expe	0.00		
stim kper oplicaclude ne va Officaclude in value va in value va in value	ide expenses paid for with non-cash government assistance ralue of such assistance and have included it on Schedule cial Form 106I.)  The rental or home ownership expenses for your residence payments and any rent for the ground or lot.  If not included in line 4:  4a. Real estate taxes	I: Your Income  e. Include first mortgage  4	a. \$	Your expe	0.00		

Official Form 106J Schedule J: Your Expenses page 1

	el Albert Schneider a Elaine Schneider	Case num	ber (if known)	1:20-bk-01383
Utilities: 6a. Electric	ty, heat, natural gas	6a.	\$	350.00
	sewer, garbage collection	6b.	·	105.00
•	one, cell phone, Internet, satellite, and cable services	6c.	*	155.00
6d. Other. S		6d.		0.00
	usekeeping supplies	7.	*	800.00
	d children's education costs	8.		30.00
Clothing, lau	ndry, and dry cleaning	9.	·	100.00
•	e products and services	10.	· —	100.00
Medical and	dental expenses	11.	\$	150.00
Transportation	n. Include gas, maintenance, bus or train fare.	12.	¢	400.00
	car payments.			
	t, clubs, recreation, newspapers, magazines, and books	13.		100.00
	ntributions and religious donations	14.	Φ	100.00
Insurance.  Do not include	insurance deducted from your pay or included in lines 4 or 20.			
15a. Life insi		15a.	\$	125.00
15b. Health i	nsurance	15b.	\$	125.00
15c. Vehicle	insurance	15c.	\$	200.00
15d. Other in	surance. Specify:	15d.	\$	0.00
Taxes. Do not Specify:	include taxes deducted from your pay or included in lines 4 or 20.	16.	\$	0.00
	r lease payments:		•	
	ments for Vehicle 1	17a.	·	150.00
	ments for Vehicle 2	17b.	·	300.00
17c. Other. S	· · · ·	17c.	*	0.00
17d. Other. S		17d.	<b>&gt;</b>	0.00
tour paymen	ts of alimony, maintenance, and support that you did not report as n your pay on line 5, <i>Schedule I, Your Income</i> (Official Form 106I).	<b>s</b> 18.	\$	0.00
	nts you make to support others who do not live with you.	-	\$	0.00
Specify:		19.	·	
	operty expenses not included in lines 4 or 5 of this form or on Sch			_
	ges on other property	20a.	·	0.00
20b. Real es		20b.		0.00
	y, homeowner's, or renter's insurance	20c.	·	0.00
	ance, repair, and upkeep expenses	20d.	·	0.00
	wner's association or condominium dues	20e.	*	0.00
Other: Specify		21.	+\$	250.00
continuing	education clases to keep licenses		+\$	200.00
	r monthly expenses			
22a. Add lines	•		\$	4,240.00
22b. Copy line	22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add line	22a and 22b. The result is your monthly expenses.		\$	4,240.00
Calculate you	r monthly net income.			
	e 12 (your combined monthly income) from Schedule I.	23a.	\$	7,163.80
	our monthly expenses from line 22c above.	23b.		4,240.00
23c Subtrac	t your monthly expenses from your monthly income.			•
	ult is your monthly net income.	23c.	\$	2,923.80
For example, do modification to t	et an increase or decrease in your expenses within the year after y you expect to finish paying for your car loan within the year or do you expect you ne terms of your mortgage?			ease or decrease because of
■ No.				
	Explain here:			